

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice  
United States Marshals Service**PROCESS RECEIPT AND RETURN**  
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF <b>United States of America</b>	COURT CASE NUMBER <b>15-02945</b>
DEFENDANT <b>BARBARA A. GANT</b>	TYPE OF PROCESS HANDBILL

**SERVE  
AT**NAME OF INDIVIDUAL, COMPANY, CORPORATION ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN  
**BARBARA A. GANT**ADDRESS (Street or RFD, Apartment No., City, State and ZIP code)  
**2666 Northfield Drive East Petersburg, PA 17520**

SEND NOTICE OF SERVICE COPY OF REQUESTER AT NAME AND ADDRESS BELOW

KML Law Group, P.C.  
701 Market  
Suite 5000  
Philadelphia, PA 19106Number of process to be  
served with this Form 285Number of parties to be  
served in this caseCheck for service  
on U.S.A.

2016 AUG 11 AM 11:47  
EASTERN DISTRICT OF  
PENNSYLVANIA  
U.S. MARSHAL SERVICE

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers and Estimated Times Available for Service)~~Please post premises by 10/1/2016.~~

Signature of Attorney other Originator requesting service behalf of:

☒ PLAINTIFF  
☐ DEFENDANTTELEPHONE NUMBER  
215-627-1322DATE  
8/11/16**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process <b>1</b>	District of Origin No. <b>66</b>	District to Serve No. <b>66</b>	Signature of Authorized USMS Deputy or Clerk <i>[Signature]</i>	Date <b>8/11/16</b>
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date  
**8-19-16** Time  
**11:10** ☒ am ☐ pmSignature of U.S. Marshal or Deputy  
*[Signature]* 0683

Service Fee <b>4 Hours</b> <b>260.00</b>	Total Mileage Charges including endeavors <b>152 ET @ .54</b> <b>82.08</b>	Forwarding Fee <b>—</b>	Total Charges <b>342.08</b>	Advance Deposits	Amount owed to U.S. Marshal of (Amount of Refund*) <b>342.08</b> <b>82.08</b>
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REMARKS:

**PROPERTY POSTED AT FRONT DOOR****\* PROPERTY OCCUPIED \*****PRINT 5 COPIES:**

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED